

# Flu E-Mail Newsletter

## Interim Influenza Vaccination Recommendations, 2004–05 Influenza Season



## CDC Announces...

On October 5, 2004, CDC was notified by Chiron Corporation that none of its influenza vaccine (Fluvirin®) would be available for distribution in the United States for the 2004–05 influenza season. The company indicated that the Medicines and Healthcare Products Regulatory Agency (MHRA) in the United Kingdom, where Chiron's Fluvirin vaccine is produced, has suspended the company's license to manufacture Fluvirin vaccine in its Liverpool facility for three months preventing any release of the vaccine for this influenza season. This action will reduce by approximately one half the expected supply of trivalent inactivated vaccine (flu shot) available in the United States for the 2004–05 influenza season.

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Because of this urgent situation, CDC, in coordination with its Advisory Committee for Immunization Practices (ACIP), is issuing interim recommendations for influenza vaccination during the 2004–05 season. These interim recommendations were formally recommended by ACIP on October 5 and replace earlier recommendations.

### Priority Groups for Influenza Vaccination

The following priority groups for vaccination with inactivated influenza vaccine this season are considered to be of equal importance and are:

- all children aged 6–23 months;
- adults aged  $\geq 65$  years;
- people aged 2–64 years with underlying chronic medical conditions;
- all women who will be pregnant during the influenza season;
- residents of nursing homes and long-term care facilities;
- children aged 6 months–18 years on chronic aspirin therapy;
- health-care workers involved in direct patient care; and
- out-of-home caregivers and household contacts of children aged  $< 6$  months.

## Other Vaccination Recommendations

- People in priority groups identified above should be encouraged to search locally for vaccine if their regular health-care provider does not have vaccine available.
- Intranasally administered, live, attenuated influenza vaccine, if available, should be encouraged for healthy persons who are aged 5–49 years and are not pregnant, including health-care workers (except those who care for severely immunocompromised patients in special care units) and persons caring for children aged <6 months.
- Certain children aged <9 years require 2 doses of vaccine if they have not previously been vaccinated. All children at high risk for complications from influenza, including those aged 6–23 months, who are brought for vaccination, should be vaccinated with a first or second dose, depending on vaccination status. However, doses should not be held in reserve to ensure that 2 doses will be available. Instead, available vaccine should be used to vaccinate persons in priority groups on a first-come, first-serve basis.

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## Vaccination of People in Nonpriority Groups

Persons who are not included in one of the priority groups described above should be informed about the urgent vaccine supply situation and asked to forego or defer vaccination.

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## People Who Should Not Receive Influenza Vaccine

People in the following groups should not receive influenza vaccine before talking with their doctor:

- People with a severe allergy (i.e., anaphylactic allergic reaction) to hens' eggs and
- People who previously had onset of Guillain-Barré syndrome during the 6 weeks after receiving influenza vaccine.



## How Does This Effect Us

- HDHHS was in the process of purchasing 8,000 doses of adult influenza vaccine.
- The vaccine would have been the Chiron product.
- We currently have no source of adult influenza vaccine for our clinics.
- It appears that we will have the needed influenza vaccine for our infant and childhood VFC program as the producer of that product was unaffected.

We are working with our partners to deal with this unforeseeable situation. We promise to keep you posted as the situation unfolds. At this time as a result of the vaccine shortage our public clinics and health centers will concentrate on educational activities to provide guidance to the community on non-vaccine preventive measures that can be taken to reduce the risk of influenza disease.

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## What Can You Do to Prevent The Flu...

Wash your hands with soap and warm water or use an alcohol based hand rub or gel frequently, especially after visiting public places or being in contact with anyone with a cold or the flu. Avoid touching your eyes, nose and mouth.

Cover your mouth when coughing or sneezing. Turn your head (never cough in the direction of someone else) and cough or sneeze into a tissue. If tissues are not available, cough or sneeze into the inside of your elbow.

Do not take young children, those with immune system problems or the chronically ill into large crowds unnecessarily when the flu is in your community.

Avoid close contact (holding, hugging and kissing) with anyone who has a cold or the flu. Be very careful with children, as they are most likely to become sick with the flu.

Stay home from work or school and avoid public activities for at least five (seven for children) days if you have symptoms of the flu.

Do not share items like drinking cups, straws, or other items that you put in your mouth.

Clean things that are touched often in household, classroom and child care settings: door or refrigerator handles, phones, water faucets etc.

# If You Want More Information...

Please visit these websites

<http://www.cdc.gov/flu>

<http://www.lungusa.org>

<http://www.houstonhealth.org>